



**Official Questions and Answers**  
**#RFP-2017-DBH-04-MOBILE**

| No. | Question   | Answer  |
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| 1.  | <b>Section 1.2</b><br>Would a multiple bed crisis center suffice for this procurement?   | Potentially, if the requirement of a minimum of four (4) community crisis apartment beds (with no more than two (2) beds per crisis apartment) certified under administrative rule He-M1002 is met. These four beds and two (2) to four (4) apartments must be solely dedicated to the delivery of services required in this RFP. |
| 2.  | <b>Section 1.3, page 6, 2nd Paragraph</b><br>What if the vendor already has an existing Memorandum of Understanding (MOU)?   | The vendor is not prohibited from incorporating an existing MOU into the plan the vendor develops. However, it is anticipated that vendor plans developed will incorporate formal agreements or MOUs with several entities, and therefore be more than one in number.   |
| 3.  | <b>Section 1.5</b><br>a. Are there any further extensions with the contract period?<br>b. What is the sustainability plan for this project beyond the initial two year contract with an option for a two year extension?     | a. See Section 1.5, Contract Period.<br>b. The Department cannot determine future legislative action the NH General Court may take. The services procured through this RFP are required for the State of New Hampshire's compliance with the Community Mental Health Agreement (CMHA).  |
| 4.  | <b>Section 1.5</b><br>If the contract approval is delayed, will there be a corresponding delay in the expectation for start-up?  | This cannot be determined at this time as a final contract has not been developed.  |
| 5.  | <b>Section 3</b><br>If floor plans of the individual apartments are not available, but the proposed units are owned by the applicant, how should the vendor proceed with meeting the requirement of submitting a floor plan? | The vendor must submit proposed floor plans if they do not have existing floor plans.   |



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| 6.  | <b>Section 3</b><br>Is the reimbursement methodology per diem or per unit? For instance, bundles per diem rate, per 24 hours, or is it a fee for service? | Reimbursement will depend on the service and the payor.  |
| 7.  | <b>Section 3.2.1.12</b><br>What is the Department's timeframe for the initial crisis period? How long is the length of immediate crisis?                  | An individual's initial crisis may require services for up to seven (7) days. Accordingly, the vendor must be able to provide services for up to seven (7) days.   |
| 8.  | <b>Section 3.2.1.3</b><br>Would the vendor be able to seek reimbursement for any time period that extends the seven (7) days?                             | Potentially. Since some services will be paid for by different payors, such as an MCO, Medicaid, a private insurer, etc. reimbursement will not necessarily be based on funds directly supporting the resultant contract. Generally, services that are part of an individual's treatment plan are considered billable services. The seven (7) day period referenced is to ensure the vendor has the capacity to serve an individual in crisis for up to a minimum of seven (7) days; it is not a treatment barrier for beyond seven (7) days.    |
| 9.  | <b>Section 3.2.3</b><br>Does the Master Clinician have to be on site 24 hours a day? Do all positions need to be there 24 hours a day?                    | The requirement in 3.2.3 of staffing, "...with sufficient clinical support and oversight, and peer staffing, ... as is reasonably necessary to prevent unnecessary institutionalization," reflects the possibility of multiple consumers in crisis at once, such to the degree that more than the three positions identified in 3.2.3.1 through 3.2.3.3. are needed. The positions identified in 3.2.3.1 through 3.2.3.3. are minimum staffing requirements that must be maintained at all times. The Psychiatrist/APRN position can be on-call. |



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| 10. | <p><b>Section 3.2.1.13</b></p> <p>In 3.2.4 and other sections, the RFP explicitly states or implies the crisis apartments cannot be utilized more than 7 days at a time, by a client. However, in 3.2.1.13, the RFP states that additional services and supports can be provided after the initial crisis period (assumed to be 7 days).</p> <p>Do these additional services and supports include crisis apartment beds? If so, will the state reimburse the vendor for the additional days beyond 7 for the crisis apartments?</p> <p>Does what the state pay to the vendor differ than the MCOs and Medicaid rates?</p> | <p>The beyond seven (7) day provision in 3.2.13 does not apply to an individual's stay in a crisis apartment.</p> <p>If services are paid for with contract funds, the payment will be cost reimbursement based and within the budget incorporated into the resultant contract.</p>   |
| 11. | <p><b>Section 3.3</b></p> <p>Are there a minimum number of staff and/or minimum licensing requirement of said staff that need to be sent out to a crisis in the community?</p>  | <p>1.3 states that the Mobile Crisis Team must consist of a Clinician, a Peer Specialist and an on-call Psychiatrist and/or APRN. At least two of the three disciplines need to go out in the community (depending on the nature of the call). All staff must meet the criteria for their positions are outlined in 3.3.4.1, 3.3.4.2, and 3.3.4.3</p> |
| 12. | <p><b>Section 3.3</b></p> <p>Do the Master level clinicians that are part of the Mobile Crisis Services and Supports program need to be licensed?</p>   | <p>No</p>   |



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| 13. | <b>Section 4</b><br>a. Are there limits to what the State is willing to contribute as part of this contract budget?<br>b. Are there limits to the amount of overhead/administrative expense allowed in the contract budget?                  | a. Yes; the resultant contract will include a negotiated price limitation. The price limitation will reflect the maximum amount of contract funds. However, due to the revenue that the vendor will receive through third parties for services provided under this contract, the amount the vendor may receive in total payments may be different than the price limitation.<br>b. See Appendix B, Contract Minimum Requirements, Exhibit C, Paragraph 7, Conditions of Purchase for standard contract provisions regarding this subject. |
| 14. | <b>Section 4</b><br>Would modifications to the apartments be covered for reimbursement?  | Reimbursement for apartment modifications is not prohibited. Each Bidder must identify its proposed costs in its budget proposal and explain such costs in its budget narrative.  |
| 15. | <b>Section 4</b><br>Will the Department reimburse the vendor for relevant operating costs when the crisis apartment beds are vacant?   | The Department understands that operating costs will be incurred by the vendor even when crisis apartment beds are vacant. See the provision stated in Appendix B, Contract Minimum Requirements, Exhibit C, Paragraph 7, Conditions of Purchase.   |
| 16. | <b>Section 4.1.1.1</b><br>a. If the selected vendor is currently being paid through an MCO contract is there a specific rate for MCO vendors?<br>b. Has there been a negotiated rate with MCO's for a client's stay in the crisis apartment? | a. The Department cannot speak to the contracts an MCO may have with its providers.<br>b. The Department's contracts with its MCOs include capitated rate schedules and can be found at: <a href="http://sos.nh.gov/GC2.aspx">http://sos.nh.gov/GC2.aspx</a>  |



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| 17. | <b>Section 4.1.1.2</b><br>Can the Department provide a list of Medicaid Fee for Service Codes?   | See codes and schedules at the following links:<br><a href="https://nhmmis.nh.gov/portals/wps/wcm/connect/b7d685004ee9ef03b0ddb8ed8a38efe/NH-HPP+Fee+Schedule+Distribution+Revised+Effective+11-01-2016.xlsx?MOD=AJPERES">https://nhmmis.nh.gov/portals/wps/wcm/connect/b7d685004ee9ef03b0ddb8ed8a38efe/NH-HPP+Fee+Schedule+Distribution+Revised+Effective+11-01-2016.xlsx?MOD=AJPERES</a><br><a href="https://nhmmis.nh.gov/portals/wps/wcm/connect/e1a8e3004ce4dd5d8ea3cf05bb4a91aa/Fee+Schedule+Update-20160418.pdf?MOD=AJPERES">https://nhmmis.nh.gov/portals/wps/wcm/connect/e1a8e3004ce4dd5d8ea3cf05bb4a91aa/Fee+Schedule+Update-20160418.pdf?MOD=AJPERES</a><br><a href="https://nhmmis.nh.gov/portals/wps/wcm/connect/350a88004bbb393c9c38fc66790f6430/20160212-ADH-REH-102.pdf?MOD=AJPERES">https://nhmmis.nh.gov/portals/wps/wcm/connect/350a88004bbb393c9c38fc66790f6430/20160212-ADH-REH-102.pdf?MOD=AJPERES</a> |
| 18. | <b>Section 4.1.2.1</b><br>Do the startup costs include capital?  | Start-up costs may include capital expenditures.   |
| 19. | <b>Section 5</b><br>In terms of scoring, is there any benefit to providing more than four (4) community crisis apartment beds?   | There are several scored questions in the RFP that incorporate the crisis apartment beds, therefore there may be benefit.  |
| 20. | <b>Section 5</b><br>a. Can the Department clarify how the points are to be awarded in the cost proposal? What metrics/algorithms are being used to weigh cost proposal responses?<br>b. Are all points awarded simply for turning in the required documentation? | a. Proposals will be scored on a consensus basis. All of the scored questions in this RFP will be based on the best interest of the State, up to the maximum number of points available per question.<br>b. Points are not awarded simply for turning in the required documentation.   |



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| 21. | <b>Section 7</b><br>Do the proposals need to be separated or combined? Can they all be boxed together?  | Cost proposals must be bound separately from the Technical proposals. However, both the Cost and the Technical proposals can be delivered in one sealed box in accordance with the requirements listed in Section 7.   |
| 22. | <b>Section 7</b><br>a. Does the Department prefer a single audit or a combined audit?<br>b. Can the vendor submit just (1) one copy of the audited financial statements with the proposals? | a. The Department would prefer a combined audit, as long as the Statements of Functional Revenues and Expenses are broken out by program.<br>b. Yes.   |
| 23. | <b>General</b><br>Will the Department send out all the required/necessary forms?  | Yes, so long as we have your contact information (either from Bidders' Conference or a Letter of Intent).  |
| 24. | <b>General</b><br>Can the proposals from vendors be hand delivered?   | Yes.   |
| 25. | <b>General</b><br>How does the state envision the differences between the role of ACT vs. the role of Mobile Crisis?  | The Department envisions individuals already receiving ACT services would not be in need of Mobile Crisis Services. The Department also envisions that individuals in need of Mobile Crisis Services would be referred to the region's CMHC to be screened for ACT services. |

**New Hampshire Department of Health and Human Services**  
**Mobile Crisis Services and Supports**



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| 26. | <b>General</b><br>a. Is there a Medicaid rate/code specifically for crisis bed care in relation to this RFP?<br>b. Does the Department plan to reimburse according to the vendor's yearly budget/actual costs?  | a. No.<br>b. If a third party payor does not reimburse the vendor for an approved contract service, the reimbursement from the Department will be based on the approved budget incorporated into the resultant contract for expenses incurred. |
| 27. | <b>General</b><br>Can the Department provide a list of Medicaid cost codes that are appropriate for reimbursement of activities related to this RFP?  | See the response to #17.   |
| 28. | <b>General</b><br>Can the Department provide a breakdown of the number of SMI/SPMI adults in each region of the state?  | No. That information is not available to the Department.   |
| 29. | <b>General</b><br>Can the Department provide Region 6's breakdown of SMI/SPMI by payor (Medicaid, MCO, private insurance or uninsured)?   | No. That information is not available to the Department.   |
| 30. | <b>General</b><br>Are the Mobile Crisis Unit program budgets for the Manchester and Concord area publicly available? Can they be provided to the bidders for this RFP? If not, can the Department provide expenditures by payor (Medicaid, MCO, private insurance or uninsured) for the Manchester & Concord areas' Mobile Crisis Unit program over a period of time, i.e. monthly, quarterly, or yearly? | The contract for those services was approved by Governor and Executive Council on June 15, 2016, Item #8 ( <a href="http://sos.nh.gov/nhsos_content.aspx?id=8589958677">http://sos.nh.gov/nhsos_content.aspx?id=8589958677</a> ).              |